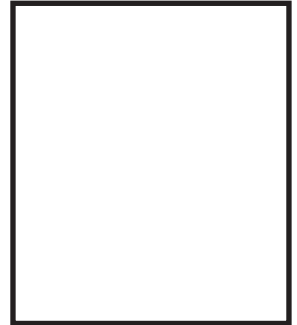




# International Centre for Church Renewal

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## DISTANT LEARNING STUDENT APPLICATION FORM

1. NAME:..... TITLE:.....  
(SURNAME FIRST)
2. ADDRESS:.....
3. TEL:.....POSTAL:.....
4. E-MAIL:.....
5. NAME OF CHURCH/MINISTRY:.....
6. POSITION HELD:.....
7. PREVIOUS QUALIFICATIONS WITH DATE:.....  
.....  
.....
8. STATE THE NUMBER OF BRANCHES, MEMBERSHIP OR IMPACT:.....  
.....  
.....
9. WHY DO YOU WANT TO TAKE THIS COURSE?.....  
.....
10. NAME/TEL. NO OF TWO REFEREES:  
1. .... TEL.: .....  
2. .... TEL.: .....
11. PLEDGE: .....
12. SIGNATURE & DATE: .....